

FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

APPLICANT(S) 119-830092

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
2						
3	1	1	1			
4						
5	2					
6	3					
7	8					
8	8					
9	1	1				
10						
11	1		1			
12						
13						
14						
15						
16						
17	1	1				
18						
19	8					
20	8					
21						
22	1	1				
23	1		1			
24	3					
25	3					
26						
27						
28						
29						
30						
31						
32						
33						
34						
35						
36						
37						
38						
39						
40						
41						
42						
43						
44						
45						
46						
47						
48						
49						
50						
TOTAL IND.			5			
TOTAL DEP.		20				
TOTAL CLAIMS		25				

CLAIMS

*	*	*	*
IND.	DEP.	IND.	DEP.
51			
52			
53			
54			
55			
56			
57			
58			
59			
60			
61			
62			
63			
64			
65			
66			
67			
68			
69			
70			
71			
72			
73			
74			
75			
76			
77			
78			
79			
80			
81			
82			
83			
84			
85			
86			
87			
88			
89			
90			
91			
92			
93			
94			
95			
96			
97			
98			
99			
100			
TOTAL IND.			
TOTAL DEP.			
TOTAL CLAIMS			